

HIGHLANDS AT NEWCASTLE PLACE

12600 NORTH PORT WASHINGTON ROAD

MEQUON 53092 Phone: (262) 387-8850

Operated from 3/2 To 12/31 Days of Operation: 305

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 47

Total Licensed Bed Capacity (12/31/03): 47

Number of Residents on 12/31/03: 23

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? No

Average Daily Census: 16

Non-Profit Corporation

Skilled

Yes

Yes

No

16

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		21.7
Supp. Home Care-Personal Care	No					1 - 4 Years		0.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years		0.0
Day Services	No	Mental Illness (Org./Psy)	30.4	65 - 74	8.7			----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	69.6			21.7
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	17.4	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	4.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	13.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	0.0	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	13.0		-----	RNs		12.8
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		15.4
Other Services	No	Respiratory	4.3		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	39.1	Male	26.1	Aides, & Orderlies		
Mentally Ill	No		----	Female	73.9			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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## Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	11	100.0	318	0	0.0	0	0	0.0	0	12	100.0	205	0	0.0	0	0	0.0	23	100.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	11	100.0		0	0.0		0	0.0		12	100.0		0	0.0		0	0.0	23	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	2.9	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.7	Bathing	0.0	82.6	17.4	23
Other Nursing Homes	6.6	Dressing	0.0	65.2	34.8	23
Acute Care Hospitals	89.0	Transferring	21.7	52.2	26.1	23
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	17.4	52.2	30.4	23
Rehabilitation Hospitals	0.0	Eating	56.5	43.5	0.0	23
Other Locations	0.7	*****				
Total Number of Admissions	136	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	4.3	Receiving Respiratory Care		0.0
Private Home/No Home Health	25.9	Occ/Freq. Incontinent of Bladder	30.4	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	24.5	Occ/Freq. Incontinent of Bowel	17.4	Receiving Suctioning		0.0
Other Nursing Homes	1.4			Receiving Ostomy Care		4.3
Acute Care Hospitals	16.1	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	4.3	Receiving Mechanically Altered Diets		30.4
Rehabilitation Hospitals	0.0					
Other Locations	26.6	Skin Care		Other Resident Characteristics		
Deaths	5.6	With Pressure Sores	4.3	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	143			Receiving Psychoactive Drugs		60.9

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Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Nonprofit %	Peer Group Ratio	Bed Size: Under 50 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	34.0	87.9	0.39	68.3	0.50	86.6	0.39	87.4	0.39
Current Residents from In-County	56.5	87.5	0.65	64.3	0.88	84.5	0.67	76.7	0.74
Admissions from In-County, Still Residing	9.6	22.9	0.42	13.4	0.71	20.3	0.47	19.6	0.49
Admissions/Average Daily Census	850.0	144.5	5.88	237.2	3.58	157.3	5.40	141.3	6.02
Discharges/Average Daily Census	893.8	147.5	6.06	246.9	3.62	159.9	5.59	142.5	6.27
Discharges To Private Residence/Average Daily Census	450.0	49.7	9.05	86.7	5.19	60.3	7.47	61.6	7.30
Residents Receiving Skilled Care	100	93.9	1.06	86.1	1.16	93.5	1.07	88.1	1.14
Residents Aged 65 and Older	100	97.1	1.03	87.0	1.15	90.8	1.10	87.8	1.14
Title 19 (Medicaid) Funded Residents	0.0	50.3	0.00	61.7	0.00	58.2	0.00	65.9	0.00
Private Pay Funded Residents	52.2	34.6	1.51	23.5	2.22	23.4	2.23	21.0	2.49
Developmentally Disabled Residents	0.0	0.6	0.00	0.0	.	0.8	0.00	6.5	0.00
Mentally Ill Residents	30.4	35.5	0.86	44.3	0.69	33.5	0.91	33.6	0.91
General Medical Service Residents	39.1	23.0	1.70	27.0	1.45	21.4	1.83	20.6	1.90
Impaired ADL (Mean)	52.2	51.9	1.01	56.9	0.92	51.8	1.01	49.4	1.06
Psychological Problems	60.9	62.2	0.98	50.4	1.21	60.6	1.00	57.4	1.06
Nursing Care Required (Mean)	4.9	7.2	0.68	8.9	0.55	7.3	0.67	7.3	0.67